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No 8

An Inaugural Dissertation

on

Fever

Philip D. Williamson

admitted March 18. 1820

By Philip D. Williamson
at Mr Rosp.
No. 184 High Street
before the faculty

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Dr. Cullen remarks that "fevers, after beginning with some degree of cold shivering, show some increase of heat, & increased frequency of pulse, with the interruption and disorder of several functions, particularly some diminution of strength, in the animal functions". Although it is generally admitted, that Dr. Cullen has been as accurate an observer of the Phenomena of Fevers, and has described them as accurately as any other - yet this definition of Fevers, will not by any means hold good in every case, as perhaps no one of the circumstances - which he has mentioned, as indicative of febrile action, invariably occurs in every Fever.

The theories of Fever have been numerous & variously modified from the time of Hippocrates, to the present period; and at the present day there are various opinions respecting the nature of Fever, and consequent variations, in the mode of treatment.

So much however, has been written on the subject

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of Fevers - and that too by persons whose talents and ample opportunity, for acquiring information on the subject, have rendered competent to the task, that it would be deemed presumption in me, whose experience has been but small, to flatter myself that any thing that I could say on the subject - would tend, in any degree, to explain the nature of Fever in general, or lead to a better mode of treatment: My object therefore will be merely to give a brief description of a Fever, of a peculiar nature, which prevails in a part of the counties of Loudoun & Fauquier, Virginia, in which I resided a short time during the last summer.

The disease which I design describing has received the appellation of Everlasting Fever, from several eminent physicians, from the circumstance of the long duration of the Febrile action of the Pulse, But the name by which I shall designate it, is, Chronic Inflammatory Fever, which name I believe was first used by Dr. L. W. Smith, with whom I spent two or three months last summer. Dr. Smith has seen a greater number

of cases of this disease, than any other physician, with whom I am acquainted, He has had not less than a hundred cases since the year 1813. —

Dr. Smith lives in a small village, about four miles distant from the Blue ridge, on the east side of it — and but few persons who were affected with this disease, were more remote from the mountain than six or eight miles. — — This Fever was attended in different individuals with such a variety of symptoms, that I am at a loss to know, in what manner I can best describe it — In no two instances probably are the symptoms the same — The action of the pulse is the most uniform — being generally what is called synochular — There appears to be a peculiar action of the pulse in this disease, which will lead persons, who have been accustomed to examine the pulse of patients, labouring under this disease, to suspect its existence immediately —

Conjoined with this affection of the pulse, the usual symptoms are, pain in some part of the chest, sometimes pain and soreness in the region of the stomach and abdomen,

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frequent headache, coldness of the extremities, particularly the lower. In two instances mentioned by Dr. Smith the abdomen was occasionally swollen to an enormous size, and would again subside, without any evident cause. In one instance the patient was confined to her bed, for six months, with a severe pain in her head, which was at length relieved by opium, but the fever still continues.

Several patients complained of nothing more, than great debility, and in these cases, considerable emaciation took place, without pain in any particular part of the body.

In many cases, probably in about one third of those which have occurred. there have been most of the symptoms of Dyspepsia -- cardialgia, a gnawing or burning sensation in the region of the stomach, flatulency, languor, and eructations of various kinds, but commonly not acid.

In some cases there were so many dyspeptic symptoms, that some physicians of the highest standing, were at first inclined to consider the whole as an epidemic dyspepsia, and under that impression have used all the remedies recommended in that disease, without having in

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any one instance, effected a complete cure, — and having been thus foiled in their attempts to cure the disease, have consented to the appellation of Everlasting Fever — —

In several instances, the patients have been attacked with Gastritis, Hepatitis, and a few with Pneumonia, which local affections, have been removed by their appropriate remedies, without effecting any particular change in the pulse — — The disease has not as yet terminated in Phthisis, abscess, or Dropsy, although several persons have been threatened with each of them — In one or two instances, there has been some Hæmoptysis — —

Women appear to be much more liable, to the attack of the disease, than men — probably the number of men who are affected with it, is to that of the women as one to fifteen or sixteen — — Some physicians, from this circumstance, were induced to believe, that this fever depended upon, and was kept up by some derangement in the organs proper to the female sex — but a very valid objection to this sentiment is, that it is not peculiar to females — Pregnancy has not been found to have any effect, in altering the action of the Pulse —

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different cases — rest has been tried, exercise of every kind, even in some instances, to as hard labour as the patient could undergo — the different mineral springs &c, have been resorted to, and all with little good effect — in no one instance, has there been a permanent cure effected, nor have I known any case, which has as yet terminated fatally — — Of the cases which occurred to Dr. Smith, several of which I saw myself, I might enumerate many, but two or three will suffice to give a general view, of the more usual symptoms — —

The first case which occurred to Dr. Smith, was, in June 1813 — Miss S. B. a lady about twenty years of age, was attacked with a highly Inflammatory Fever — she had pain in her breast and side, and sometimes in her head — Dr. Smith says "I bled her in all not less than thirty times, often copiously. The usual antiphlogistic course was rigidly persisted in, without any crisis being effected, she was put upon a course of mercury, and salivation kept up for a considerable length of time — this also proved unavailing — Several physicians were called in

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consultation, and we used every medicine which we thought, promised to be at all beneficial, and the only one, from the use of which, we perceived the least good effect, was the Digitalis, of which she took a large quantity in infusion" — In fifteen or eighteen months time she was able to ride about, and her physicians having become weary of prescribing, and she of using their prescriptions, particularly as she derived very little, if any benefit from them, her medicines were omitted — she has been bled occasionally since and still labours under the Fever, which is generally very high, notwithstanding which, she looks tolerably well, continues to ride about and does not very often complain, except of some degree of debility, and occasionally of some pain, either in the head, breast, or side — she has not been entirely free from Febrile action of the pulse for more than six years — — Some of the Physicians who have attended her, at first, supposed the fever to be kept up by a tubercular state of the lungs — But she has rarely had any cough — nor were the usual symptoms

of Phthesis present. Others have attributed it to an affection of the liver. But it is reasonable to suppose, that if there were such an affection of this viscus, its existence, would have been more clearly developed, before this time. It was ascribed to another cause, by other physicians. viz. to a derangement of the functions of the uterus and its dependencies. But this supposition rests on as baseless a foundation, as either of the former; as there is not the slightest evidence of any such derangement. Dr. Smith's opinion, is, that it is purely an inflammatory diathesis of the arterial system.
If I could be brought to believe, that, there were any such thing as an Idiopathic fever; I should have no hesitation, in considering this fever as belonging to that class. but from what I have seen of the disease I am disposed to think, that the stomach & alimentary canal are primarily affected, although such affection, is not evident, in many cases.
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tend to evince the difficulty of ascertaining anything of its true nature, with certainty – "Causa latet, vis est notissima" –

The first case which I had an opportunity of observing, was, in Mrs F. a corpulent woman between forty & fifty years of age. When I saw her first, she had been confined to her bed, for two or three months; she had a little cough, slight pain in her chest, and was not unfrequently troubled with headache, she complains however principally of debility – she has cold feet, her pulse is, quick, tense, hard, and corded.

Almost ever since her first attack, she has been bled every two or three days, sometimes largely & even profusely – she has strictly observed the antiphlogistic regimen, and has taken the usual remedies for inflammatory diseases, but still there is no abatement of the Fever – When I have seen her bled, the loss of 12 or 16 ℥ has had the effect of reducing the pulse considerably, "pro tempore", but in the space of twenty or thirty minutes after the Bleeding, the Pulse

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was nearly as active as before.
Finding that the depleting plan, had no effect in subduing the Fever, but only increased the debility, which was now the most urgent symptom - Dr. Smith changed his mode of treatment, and made use of Tonics, which for a day or two appeared to be serviceable, but in the course of four or five days, he was obliged to discontinue their use, in consequence of their evidently increasing the disease, and heightening all the symptoms, particularly, the pain in her breast, side, & head, her pulse was also rendered, much more febrile, and her strength not recruited -
Dr. Smith omitted her medicines, and she remains nearly "in statu quo", probably better than when taking them, or at any rate not worse - She is able to sit up, and walk a little about the house - She continues to lose a little blood occasionally -

Mrs Williams has been ill for more than three years. In the first attack of the Fever,

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she was bled very frequently, and copiously.
She has been under the care of different Physicians.
has taken medicines of various kinds, to a large amount
has been in a state of profuse salivation twice this
her Fever however remains unaltered - From her own
account, she is worse every other day, so that on one
day, she is able to be employed in the business of the
family, and on the next is obliged to keep her bed -
This is the only case wh I have seen, in which
there appeared to be any evident intermission, -
She says, that for a considerable time after the com
mencement of the disease, she had cold feet, which
symptom has now left her, - She has pain in her head
left breast, and shoulder, particularly after taking
exercise, or exercise aggravates these symptoms -
Her stomach is in so disordered a state, that she
can eat nothing, but it has the effect of exciting
disagreeable eructations, and increasing the violence
of the Fever. On the worst days, she has a burning
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sensation, (which she says is wholly indescribable) at the top of the sternum, which extends in some degree to the left shoulder, and as it were through the joint. This sensation is such, that she sometimes feels, as if she must inevitably suffocated — This woman is about 35 years of age and has borne one or two children since her first attack —

Miss S. P. was attacked about eighteen months ago, and has been under medical treatment ever since. In her case Dr. Smith has used almost every article of the Materia Medica, which he and other physicians who were called in consultation, thought at all calculated to be useful — independent of other means which were used, she has been bled twenty or thirty times; the Tincture of Digitalis was used to a large amount, which produced a great degree of sickness, nausea, and vomiting; But all the means used proved unavailing, I saw her first in August last, she complained

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of languor, heaviness, listlessness and disinclination to move &c. her head was much affected, with pain - she had heavy dull pain in her eyes, and in addition to these, there was morbid vigilance to so distressing a degree, that she seldom slept more than two or three hours in the twenty four. Although she had been under the treatment which I have mentioned above; her pulse was hard, tense, quick, and more full, than in most cases of this Fever which I had seen, notwithstanding which, she was walking about, and looked tolerably well - I detracted about ℥xvi of blood, which had the effect of reducing her pulse, for the time, but in about half an hour, I was astonished to find it nearly as active as before - As the watchfulness was the most distressing symptom, with which she was affected, I was anxious, if possible, to administer something which would have a tendency to relieve it.

Supposing the irritation, which kept up the fever most probably existed in the stomach or alimentary

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canal, I at first thought of using Emetics & other evacuants, but the Digitalis which she had already taken, had very frequently operated as an emetic, without producing any beneficial effects.

My object therefore was to allay irritation, and as, with this intention, opium was contraindicated, by the state of the system, I proposed to Dr. Smith, to use the tela aranei in her case. he readily consented, and I accordingly sent her a box of pills, each containing about two grains of cobweb, with directions to take one, three times a day. In the course of a few days I saw her, & was pleased to find that she had been much benefitted, she slept considerably longer than heretofore and the affection of her head and eyes was greatly relieved.

As I had never seen the cobweb exhibited, I was anxious to ascertain its effect upon the pulse, and desired her to take two of the pills at once, which she did, and I found that, in a short time, it had the effect of reducing her pulse about 10 strokes in the minute. she continued to use the pills at intervals until I left

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the neighbourhood. When I last saw her, she told me that her health was much better than it had been for nearly two years, but her pulse is still febrile, and some of the symptoms remain, but not to so distressing a degree. In a letter which I received from Dr. Smith, last Jan.y, he informed me that she was still in the same state as when I saw her, and that he derives as much benefit from the use of the sulphat of Zinc in small doses as from the cobweb. Dr. Smith has used the cobweb in several other cases, and with nearly equal benefit.

I might go on to enumerate cases, but those will be sufficient to show, that this fever, whatever may be its nature, is a very extraordinary disease. In some cases, it is marked by most of the usual symptoms of Phthisis Pulmonalis, in others, by those of Dyspepsia, and of many other diseases, which might be mentioned, and here it is worthy of notice, that since its first appearance, no cases of Intermittent, remittent, or typhous fevers have occurred.

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of this disease, has induced the medical men, who have had an opportunity of observing it, to entertain very contradictory sentiments, with respect to its nature. What is its nature I cannot take upon me to say. When men who have been practising for ten, twenty, or thirty years, have views so diametrically opposite on this subject, I presume, that I may be permitted to say to them, "non nostrum inter vos, tantas componere lites!" I have sometimes been disposed to consider it as a species of Chronic Inflammation of the stomach, and it is certainly, in many particulars very similar to this disease. But by what means, such a febrile action of the pulse is kept up, for so great a length of time; or how, in this disease, the system is enabled to bear up, under such an action of the pulse, as is usually found, to prove not only injurious, but fatal, I am utterly unable to say. It is probable that in this, as in other diseases, when the wrong actions, have become habitual, the difficulty of overcoming them, is greatly enhanced.

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"Of the nature of Fever, very little is known; the proximate cause is a subject of a dark nature, such as perhaps our limited capacities, will never develope."

When we are able to say, what peculiarly it is, in the structure of the Liver, which causes it to secrete Bile; what in that of the stomach, which causes it to secrete the Gastric liquor, What in that of the Uterus, which causes it to secrete the menses, &c. and in what consists the power in animals of preserving an equable temperature, when exposed to one, either very high, or very low; then we may hope that the time is not far distant, when we shall be able, to understand and explain the Proximate cause of fever. Many have been the theories of Fever, and one theory has successively supplanted a former, and each theorist acting according to the theory which he has advanced, or embraced, there have been such perpetual revolutions, in the modes of treating Febrile diseases; that we can scarcely avoid concluding, that little is as yet known, with certainly, of the matter. Medical men have wandered from

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conjecture to conjecture, for more than two thousand years, and we do not yet perceive any prospect, of these conjectures being nearer to an end —

The more general remote causes of Fevers are, certain invisible exhalations, sometimes more evidently arising from marshy grounds, sometimes more obscurely diffused in the atmosphere, and sometimes obviously proceeding from the bodies of our fellow men. We are not able to ascertain the nature of these effluvia, and it is only by conjecture, that we trace them in the channels, by which they enter the body. The changes which they operate on the solids, fluids, or nervous system, before their action becomes obvious, are totally unknown to us" — —

As of other Fevers, so of the disease of which I am treating, I think the remote cause is to be sought for in the atmosphere. The state of the atmosphere deserves, more attention than it generally receives. I think, and this opinion

I am induced to entertain, from observing the different effects of the same remedy, in the same disease, in different seasons - for example, the Bilious Fevers of some seasons, require pretty copious Venesection, which in those, of other seasons, though apparently, demanding it, would prove highly detrimental - ~~so of others~~ which might be mentioned.

As respects Epidemics generally, the received opinion is, that they have their source in the atmosphere, and it is known, that they usually confer on other diseases, their peculiar characteristics - as happens in other Epidemics, ~~so~~ in this, all the diseases which have appeared since its first occurrence, have been inflammatory. Since the year 1814, there have been no cases either of Typhus, Intermittent, or remittent Bilious Fever - On the contrary, every disease which has occurred in that district of country has been marked by so highly Inflammatory symptoms - as in almost every instance to call for copious depletion by the lancet & otherwise.

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the cause of this disease, I am wholly unable to say but judging from its effects, I should consider it a very permanent one -- I have before remarked that its effects on different individuals, were various - In some cases on which it acts on the particular predisposition, it induces all the symptoms of Pulmonary Consumption In other cases, a variety of other diseases - and in one case which I have mentioned, the disease was attended with symptoms, very similar to those of angina pectoris, But instead of attacking corpulent, robust men, who are said to be most liable to Angina; in this instance It selected a slender, delicate female - -

The permanency of the principle, has induced some to consider it as a superabundance of oxygen in the air, & this sentiment would appear to receive some support, from the circumstance, that some of the symptoms, were the reverse of those which were produced, by a deficiency of oxygen, as in ascending high mountains; Nevertheless there have not been wanting, others who impeded it to a deficiency

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of that principle – A variety of other suppositions might be mentioned, but as they are all mere Hypotheses I shall not notice them –

An objection however, has been started, against the sentiment, that this fever is at all dependent on the atmosphere, because if that were the case, (say they who make the objection) all who reside in the same district should be attacked with it – But the same objection might with equal propriety be made to any Epidemic – in answer to the objection however as relates to this fever, I would say that I believe this to be the fact in a greater or less degree, for a little irritation, or a slight deviation from the natural state, may be perceived in the pulse of almost all.

I am inclined to think, that temperament has a principal share in determining the point, who shall be attacked by this disease, and to this I am led from having observed, that in almost every instance, it had been particularly violent, in its action on persons of the sanguineous temperament –

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Having thus detailed the more usual symptoms of this disease, It might be expected that I would recommend some mode of treatment. But my experience in it does not warrant my attempting any thing of the kind, particularly as I have before stated, that almost all the articles of the Materia Medica, possessed of any great degree of activity, have been unavailingly employed in the different cases.

If such a disease should occur in my practice, I would treat it, on general principles. If symptoms of Dyspepsia were present, I would treat it as Dyspepsia. If there were symptoms of Angina Pectoris, By its appropriate remedies. If there were the symptoms of Pulmonary Consumption, I would employ the means, adapted to the cure or alleviation of that disease. &c. and as one of those means, I would recommend a change of climate, and in this case, I think it probable that a miasmatic country, might prove most beneficial, from the circumstance which I before stated,

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that no case of Intermittent, or Bilious Remittent Fever, has occurred, since this disease first made its appearance, although they were very common before. When the febrile action of the bloodvessels, has become habitual, might not the Prussic acid, be used with advantage, in connexion with other means, to subvert it?

Imperfect as the foregoing description of this disease has necessarily been, for many reasons. I conclude confidently trusting that it, may solicit a lenient criticism or examination, and the subject excite, that attention which it seems to merit, from those whose prerogative it is to do me the honour of reading this paper, and whose talents and acquirements, render so competent to elucidate the nature of, and advise the proper remedies for diseases in general; and that this disease may not be doomed, to seek a station, in the already too crowded list of the "Opprobria Medicorum"

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A

Dissertation

on

Fever —

by William [illegible]

of Tennessee

admitted March 22d. 1831